

ENGROSSED HOUSE BILL No. 1297

DIGEST OF HB 1297 (Updated February 26, 2002 4:43 PM - DI 84)

Citations Affected: IC 25-1; IC 25-23; IC 25-23.2; noncode.

Synopsis: Interstate nurse licensure compact. Adopts the interstate nurse licensure compact to allow a registered nurse or licensed practical nurse who is licensed in another state that is a party to the compact to practice nursing in Indiana. Provides that the state board of nursing administers the compact. Provides that the compact may not be implemented until July 1, 2003. Adds funding sources to the impaired nurses account. (The introduced version of this bill was prepared by the health finance commission.)

Effective: July 1, 2002.

Welch, Brown C, Dillon, Borror

(SENATE SPONSORS — MILLER, SIMPSON)

January 14, 2002, read first time and referred to Committee on Public Health. January 23, 2002, amended, reported — Do Pass. January 28, 2002, read second time, ordered engrossed. Engrossed. January 30, 2002, read third time, passed. Yeas 87, nays 2.

SENATE ACTION
February 1, 2002, read first time and referred to Committee on Transportation and Interstate Cooperation.
February 21, 2002, amended, reported favorably — Do Pass.
February 26, 2002, read second time, amended, ordered engrossed.











Second Regular Session 112th General Assembly (2002)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2001 General Assembly.

ENGROSSED HOUSE BILL No. 1297

A BILL FOR AN ACT to amend the Indiana Code concerning professions and occupations.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 25-1-7-9 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 9. A board member shall disqualify himself is disqualified from any consideration of the case if he the board member filed the complaint or if he participated in negotiations regarding the complaint. He The board member is not disqualified from the board's final determination solely because he the board member was the hearing officer or determined the complaint and the information pertaining to the complaint was current significant investigative information (as defined by IC 25-23.2-1-5).

SECTION 2. IC 25-1-7-10 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 10. (a) All complaints and information pertaining to the complaints shall be held in strict confidence until the attorney general files notice with the board of his the attorney general's intent to prosecute the licensee. Unless required to do so under law or in furtherance of an investigation, no

(b) A person in the employ of the office of attorney general or any of the boards, nor or any person not a party to the complaint, shall may

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1	not disclose or further a disclosure of information concerning the
2	complaint unless the disclosure is required:
3	(1) under law; or
4	(2) for the advancement of an investigation.
5	(c) Notwithstanding subsections (a) and (b), under IC 25-23.2
6	the state board of nursing may disclose to the coordinated licensure
7	information system (as defined by IC 25-23.2-1-4) complaints and
8	information concerning complaints that the board determines to be
9	current significant investigative information (as defined by
10	IC 25-23.2-1-5).
11	SECTION 3. IC 25-23-1-1.1 IS AMENDED TO READ AS
12	FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 1.1. (a) As used in this
13	chapter, "registered nurse" means a person who holds a valid license
14	issued:
15	(1) under this chapter; or
16	(2) by a party state (as defined in IC 25-23.2-1-11); and
17	who bears primary responsibility and accountability for nursing
18	practices based on specialized knowledge, judgment, and skill derived
19	from the principles of biological, physical, and behavioral sciences.
20	(b) As used in this chapter, "registered nursing" means performance
21	of services which include but are not limited to:
22	(1) assessing health conditions;
23	(2) deriving a nursing diagnosis;
24	(3) executing a nursing regimen through the selection,
25	performance, and management of nursing actions based on
26	nursing diagnoses;
27	(4) advocating the provision of health care services through
28	collaboration with or referral to other health professionals;
29	(5) executing regimens delegated by a physician with an
30	unlimited license to practice medicine or osteopathic medicine, a
31	licensed dentist, a licensed chiropractor, a licensed optometrist,
32	or a licensed podiatrist;
33	(6) teaching, administering, supervising, delegating, and
34	evaluating nursing practice;
35	(7) delegating tasks which assist in implementing the nursing,
36	medical, or dental regimen; or
37	(8) performing acts which are approved by the board or by the
38	board in collaboration with the medical licensing board of
39	Indiana.
40	(c) As used in this chapter, "assessing health conditions" means the
41	collection of data through means such as interviews, observation, and



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inspection for the purpose of:

	(4) 1
1	(1) deriving a nursing diagnosis;
2	(2) identifying the need for additional data collection by nursing
3	personnel; and
5	(3) identifying the need for additional data collection by other
6	health professionals. (d) As used in this chapter, "nursing regimen" means preventive,
7	restorative, maintenance, and promotion activities which include
8	meeting or assisting with self-care needs, counseling, and teaching.
9	(e) As used in this chapter, "nursing diagnosis" means the
10	identification of needs which are amenable to nursing regimen.
11	SECTION 4. IC 25-23-1-1.2 IS AMENDED TO READ AS
12	FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 1.2. As used in this
13	chapter, "licensed practical nurse" means a person who holds a valid
14	license issued under this chapter or by a party state (as defined in
15	IC 25-23.2-1-11) and who functions at the direction of:
16	(1) a registered nurse;
17	(2) a physician with an unlimited license to practice medicine or
18	osteopathic medicine;
19	(3) a licensed dentist;
20	(4) a licensed chiropractor;
21	(5) a licensed optometrist; or
22	(6) a licensed podiatrist;
23	in the performance of activities commonly performed by practical
24	nurses and requiring special knowledge or skill.
25	SECTION 5. IC 25-23-1-7 IS AMENDED TO READ AS
26	FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 7. (a) The board shall
27	do the following:
28	(1) Adopt under IC 4-22-2 rules necessary to enable it to carry
29	into effect this chapter.
30	(2) Prescribe standards and approve curricula for nursing
31	education programs preparing persons for licensure under this
32	chapter.
33	(3) Provide for surveys of such programs at such times as it
34	considers necessary.
35	(4) Accredit such programs as meet the requirements of this
36	chapter and of the board.
37	(5) Deny or withdraw accreditation from nursing education
38	programs for failure to meet prescribed curricula or other
39	standards.
40	(6) Examine, license, and renew the license of qualified
41	applicants.
42	(7) Issue subpoenas, compel the attendance of witnesses, and



1	administer oaths to persons giving testimony at hearings.
2	(8) Cause the prosecution of all persons violating this chapter and
3	have power to incur necessary expenses for these prosecutions.
4	(9) Adopt rules under IC 4-22-2 that do the following:
5	(A) Prescribe standards for the competent practice of
6	registered, practical, and advanced practice nursing.
7	(B) Establish with the approval of the medical licensing board
8	created by IC 25-22.5-2-1 requirements that advanced practice
9	nurses must meet to be granted authority to prescribe legend
10	drugs and to retain that authority.
11	(10) Keep a record of all its proceedings.
12	(11) Collect and distribute annually demographic information on
13	the number and type of registered nurses and licensed practical
14	nurses employed in Indiana.
15	(12) Notify each registered nurse and licensed practical nurse
16	residing in Indiana when final rules concerning the practice of
17	nursing are published in the Indiana register.
18	(12) Adopt rules and administer the interstate nurse licensure
19	compact under IC 25-23.2.
20	(b) The board may do the following:
21	(1) Create ad hoc subcommittees representing the various nursing
22	specialties and interests of the profession of nursing. Persons
23	appointed to a subcommittee serve for terms as determined by the
24	board.
25	(2) Utilize the appropriate subcommittees so as to assist the board
26	with its responsibilities. The assistance provided by the
27	subcommittees may include the following:
28	(A) Recommendation of rules necessary to carry out the duties
29	of the board.
30	(B) Recommendations concerning educational programs and
31	requirements.
32	(C) Recommendations regarding examinations and licensure
33	of applicants.
34	(3) Appoint nurses to serve on each of the ad hoc subcommittees.
35	(4) Withdraw from the interstate compact under IC 25-32.2.
36	(c) Nurses appointed under subsection (b) must:
37	(1) be committed to advancing and safeguarding the nursing
38	profession as a whole; and
39	(2) represent nurses who practice in the field directly affected by
40	a subcommittee's actions.
41	SECTION 6. IC 25-23-1-11, AS AMENDED BY P.L.236-1999,
42	SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE



1 2	JULY 1, 2002]: Sec. 11. (a) Any person who applies to the board for a license to practice as a registered nurse must:
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<i>3</i>	(1) not have:
	(A) been convicted of a crime that has a direct bearing on the
5	person's ability to practice competently; or
6	(B) committed an act that would constitute a ground for a
7	disciplinary sanction under IC 25-1-9;
8	(2) have completed:
9	(A) the prescribed curriculum and met the graduation
10	requirements of a state accredited program of registered
11	nursing that only accepts students who have a high school
12	diploma or its equivalent as determined by the board; or
13	(B) the prescribed curriculum and graduation requirements of
14	a nursing education program in a foreign country that is
15	substantially equivalent to a board approved program as
16	determined by the board. The board may by rule adopted under
17	IC 4-22-2 require an applicant under this subsection to
18	successfully complete an examination approved by the board
19	to measure the applicant's qualifications and background in the
20	practice of nursing and proficiency in the English language;
21	and
22	(3) be physically and mentally capable of and professionally
23	competent to safely engage in the practice of nursing as
24	determined by the board.
25	The board may not require a person to have a baccalaureate degree in
26	nursing as a prerequisite for licensure.
27	(b) The applicant must pass an examination in such subjects as the
28	board may determine.
29	(c) The board may issue by endorsement a license to practice as a
30	registered nurse to an applicant who has been licensed as a registered
31	nurse, by examination, under the laws of another state if the applicant
32	presents proof satisfactory to the board that, at the time that the
33	applicant applies for an Indiana license by endorsement, the applicant
34	holds a current license in another state and possesses credentials and
35	qualifications that are substantially equivalent to requirements in
36	Indiana for licensure by examination. The board may specify by rule
37	what constitutes substantial equivalence under this subsection.
38	(d) The board may issue by endorsement a license to practice as a
39	registered nurse to an applicant who:
40	(1) has completed the English version of the Canadian Nurse
41	Association Testing Service Examination;
42	(2) achieved the passing score required on the examination at the



1	time the examination was taken;
2	(3) is currently licensed in a Canadian province or in another
3	state; and
4	(4) meets the other requirements under this section.
5	(e) Each applicant for examination and registration to practice as a
6	registered nurse shall pay a fee set by the board. The board may set a
7	proctoring fee to be paid by applicants who are graduates of a state
8	accredited school in another state. Payment of the fee or fees shall be
9	made by the applicant prior to the date of examination.
10	(f) Any person who holds a license to practice as a registered nurse
11	in:
12	(1) Indiana; or
13	(2) a party state (as defined in IC 25-23.2-1-11);
14	may use the title "Registered Nurse" and the abbreviation "R.N.". No
15	other person shall practice or advertise as or assume the title of
16	registered nurse or use the abbreviation of "R.N." or any other words,
17	letters, signs, or figures to indicate that the person using same is a
18	registered nurse.
19	(g) Any person holding a license or certificate of registration to
20	practice nursing as a registered nurse issued by the board which is valid
21	on December 1, 1971, shall be considered to be licensed as a registered
22	nurse under this chapter.
23	SECTION 7. IC 25-23-1-12 IS AMENDED TO READ AS
24	FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 12. (a) A person who
25	applies to the board for a license to practice as a licensed practical
26	nurse must:
27	(1) not have been convicted of:
28	(A) an act which would constitute a ground for disciplinary
29	sanction under IC 25-1-9; or
30	(B) a crime that has a direct bearing on the person's ability to
31	practice competently;
32	(2) have completed:
33	(A) the prescribed curriculum and met the graduation
34	requirements of a state accredited program of practical nursing
35	that only accepts students who have a high school diploma or
36	its equivalent, as determined by the board; or
37	(B) the prescribed curriculum and graduation requirements of
38	a nursing education program in a foreign country that is
39	substantially equivalent to a board approved program as
40	determined by the board. The board may by rule adopted under
41	IC 4-22-2 require an applicant under this subsection to
42	successfully complete an examination approved by the board



1	to measure the applicant's qualifications and background in the
2	practice of nursing and proficiency in the English language;
3	and
4	(3) be physically and mentally capable of, and professionally
5	competent to, safely engage in the practice of practical nursing as
6	determined by the board.
7	(b) The applicant must pass an examination in such subjects as the
8	board may determine.
9	(c) The board may issue by endorsement a license to practice as a
10	licensed practical nurse to an applicant who has been licensed as a
11	licensed practical nurse, by examination, under the laws of another
12	state if the applicant presents proof satisfactory to the board that, at the
13	time of application for an Indiana license by endorsement, the applicant
14	possesses credentials and qualifications that are substantially
15	equivalent to requirements in Indiana for licensure by examination. The
16	board may specify by rule what shall constitute substantial equivalence
17	under this subsection.
18	(d) Each applicant for examination and registration to practice as a
19	practical nurse shall pay a fee set by the board. The board may set a
20	proctoring fee to be paid by applicants who are graduates of a state
21	accredited school in another state. Payment of the fees shall be made
22	by the applicant before the date of examination.
23	(e) Any person who holds a license to practice as a licensed
24	practical nurse in:
25	(1) Indiana; or
26	(2) a party state (as defined in IC 25-23.2-1-11);
27	may use the title "Licensed Practical Nurse" and the abbreviation
28	"L.P.N.". No other person shall practice or advertise as or assume the
29	title of licensed practical nurse or use the abbreviation of "L.P.N." or
30	any other words, letters, signs, or figures to indicate that the person
31	using them is a licensed practical nurse.
32	SECTION 8. IC 25-23-1-16.1 IS AMENDED TO READ AS
33	FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 16.1. (a) A license to
34	practice as a registered nurse expires on October 31 in each
35	odd-numbered year. Failure to renew the license on or before the
36	expiration date will automatically render the license invalid without
37	any action by the board.
38	(b) A license to practice as a licensed practical nurse expires on
39	October 31 in each even-numbered year. Failure to renew the license
40	on or before the expiration date will automatically render the license
41	invalid without any action by the board.

(c) The procedures and fee for renewal shall be set by the board.



1	(d) At the time of license renewal, each registered nurse and each
2	licensed practical nurse shall pay an additional a renewal three dollar
3	(\$3) fee, a portion of which shall be for the rehabilitation of
4	impaired registered nurses and impaired licensed practical nurses.
5	The lesser of the following amounts from fees collected under this
6	subsection shall be deposited in the impaired nurses account of the
7	state general fund established by section 34 of this chapter:
8	(1) Three dollars (\$3) Sixteen percent (16%) of the license
9	renewal fee per license renewed under this section.
10	(2) The cost per license to operate the impaired nurses program,
11	as determined by the health professions bureau.
12	SECTION 9. IC 25-23-1-27 IS AMENDED TO READ AS
13	FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 27. A person who:
14	(1) sells or fraudulently obtains or furnishes any nursing diploma,
15	license or record;
16	(2) practices nursing under cover of any diploma or license or
17	record illegally or fraudulently obtained or assigned or issued
18	unlawfully or under fraudulent representation;
19	(3) practices nursing as a registered nurse or licensed practical
20	nurse unless duly licensed to do so under this chapter or under
21	IC 25-23.2;
22	(4) uses in connection with his the person's name any
23	designation tending to imply that he the person is a registered
24	nurse or a licensed practical nurse unless duly licensed so to
25	practice under this chapter or under IC 25-23.2;
26	(5) practices nursing during the time his the person's license
27	issued under this chapter or under IC 25-23.2 is suspended or
28	revoked;
29	(6) conducts a school of nursing or a program for the training of
30	practical nurses unless the school or program has been accredited
31	by the board; or
32	(7) otherwise violates this chapter;
33	commits a Class B misdemeanor.
34	SECTION 10. IC 25-23-1-31 IS AMENDED TO READ AS
35	FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 31. (a) As used in this
36	section, "impaired registered nurse or licensed practical nurse" means
37	a registered nurse or licensed practical nurse who has been affected by
38	the use or abuse of alcohol or other drugs.
39	(b) The board shall assist in the rehabilitation of an impaired
40	registered nurse or licensed practical nurse.

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(c) The board may do the following:

(1) Enter into agreements, provide grants, and make other



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1 2	arrangements with statewide nonprofit professional associations, or other entities specifically devoted to the
3	rehabilitation of impaired health care professionals to identify
4	and assist impaired registered nurses and licensed practical
5	nurses.
6	(2) Accept and designate grants, public and private financial
7	assistance, and licensure fees to fund programs under subdivision
8	(1) to assist impaired registered nurses and licensed practical
9	nurses.
10	(d) Except as provided in subsection (f), all:
11	(1) information furnished to a nonprofit professional association,
12	or foundation, or other entity specifically devoted to the
13	rehabilitation of impaired health care professionals, including
14	interviews, reports, statements, and memoranda; and
15	(2) findings, conclusions, or recommendations that result from a
16	proceeding of the professional association, or foundation, or
17	other entity specifically devoted to the rehabilitation of
18	impaired health care professionals;
19	are privileged and confidential.
20	(e) The records of a proceeding under subsection (d) may be used
21	only in the exercise of proper functions of the board, and may not
22	become public records or subject to a subpoena or discovery
23	proceeding.
24	(f) Information received by the board from the board designated
25	rehabilitation program for noncompliance by the registered nurse or
26	licensed practical nurse may be used by the board in any disciplinary
27	or criminal proceedings instituted against the impaired registered nurse
28	or licensed practical nurse.
29	(g) The board designated rehabilitation program shall:
30	(1) immediately report to the board the name and results of any
31	contact or investigation concerning an impaired registered nurse
32 33	or licensed practical nurse who the program believes constitutes
34	a certain, immediate, and impending danger to either the public or the impaired registered nurse or licensed practical nurse; and
35	(2) in a timely fashion report to the board an impaired registered
36	nurse or licensed practical nurse:
37	(A) who refuses to cooperate with the program;
38	(B) who refuses to cooperate with the program, (B) who refuses to submit to treatment; or
39	(C) whose impairment is not substantially or significantly
40	alleviated through treatment, as determined by accepted
41	medical standards.

SECTION 11. IC 25-23-1-34 IS AMENDED TO READ AS

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1	FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 34. (a) The impaired
2	nurses account is established within the state general fund for the
3	purpose of providing money for providing rehabilitation of impaired
4	registered nurses or licensed practical nurses under this article. The
5	account shall be administered by the health professions bureau.
6	(b) Expenses of administering the account shall be paid from money
7	in the account. The account consists of the following:
8	(1) The additional fee collected under section 16.1(d) of this
9	chapter.
10	(2) Funds collected under section 31(c)(2) of this chapter.
11	(3) Funds collected under IC 25-23.2-3-5.
12	(4) Fines collected from registered nurses or licensed practical
13	nurses under IC 25-1-9-9(a)(6).
14	(c) The treasurer of state shall invest the money in the account not
15	currently needed to meet the obligations of the account in the same
16	manner as other public money may be invested.
17	(d) Money in the account is appropriated to the board for the
18	purpose stated in subsection (a).
19	SECTION 12. IC 25-23.2 IS ADDED TO THE INDIANA CODE
20	AS A NEW ARTICLE TO READ AS FOLLOWS [EFFECTIVE JULY
21	1, 2002]:
22	ARTICLE 23.2. INTERSTATE NURSE LICENSURE
23	COMPACT
24	Chapter 1. Definitions
25	Sec. 0.5. It is the purpose of this compact to allow qualified
26	nurses who are licensed in a compact state to practice nursing in
27	another compact state and to reduce redundant licensing
28	requirements of nurses who practice in multiple states.
29	Sec. 1. The definitions in this chapter apply throughout this
30	article.
31	Sec. 2. "Adverse action" means a home or remote state action.
32	Sec. 3. "Alternative program" means a voluntary,
33	nondisciplinary monitoring program approved by a nurse licensing
34	board.
35	Sec. 4. "Coordinated licensure information system" means an
36	integrated process for collecting, storing, and sharing information
37	on nurse licensure and enforcement activities related to nurse
38	licensure laws, which is administered by a nonprofit organization
39	composed of and controlled by state nurse licensing boards.
40	Sec. 5. "Current significant investigative information" means:
41	(1) investigative information that a licensing board, after a
42	preliminary inquiry that includes notification and an



1	opportunity for the nurse to respond if required by state law,
2	has reason to believe is not groundless and, if proved true,
3	would indicate more than a minor infraction; or
4	(2) investigative information that indicates that the nurse
5	represents an immediate threat to public health and safety
6	regardless of whether the nurse has been notified and had an
7	opportunity to respond.
8	Sec. 6. "Home state" means the party state that is the nurse's
9	primary state of residence.
10	Sec. 7. "Home state action" means any administrative, civil,
11	equitable, or criminal action permitted by the home state's laws
12	that are imposed on a nurse by the home state's licensing board or
13	other authority, including an action against an individual's license
14	such as revocation, suspension, probation, or any other action that
15	affects a nurse's authorization to practice.
16	Sec. 8. "Licensing board" means a party state's regulatory body
17	responsible for issuing nurse licenses.
18	Sec. 9. "Multistate licensure privilege" means current, official
19	authority from a remote state permitting the practice of nursing as
20	either a registered nurse or a licensed practical/vocational nurse in
21	that party state. All party states have the authority, in accordance
22	with state due process law, to take actions against the nurse's
23	privilege such as revocation, suspension, probation, or any other
24	action that affects a nurse's authorization to practice.
25	Sec. 10. "Nurse" means a registered nurse or licensed
26	practical/vocational nurse as defined by the state practice laws of
27	each party state.
28	Sec. 11. "Party state" means any state that has adopted this
29	compact.
30	Sec. 12. "Remote state" means a party state, other than the
31	home state:
32	(1) where the patient is located at the time nursing care is
33	provided; or
34	(2) in the case of the practice of nursing not involving a
35	patient, in a party state where the recipient of nursing
36	practice is located.
37	Sec. 13. "Remote state action" means:
38	(1) any administrative, civil, equitable, or criminal action
39	permitted by a remote state's laws that are imposed on a
40	nurse by the remote state's licensing board or other authority,
11	including actions against an individual's multistate licensure

privilege to practice in the remote state; and



(2) cease and desist and other injunctive or equitable orders
issued by remote states or the licensing boards of remote
states.
See 14 "State" means a state territory or nessession of the

Sec. 14. "State" means a state, territory, or possession of the United States, the District of Columbia, or the Commonwealth of Puerto Rico.

Sec. 15. "State practice laws" means the individual party state's laws and rules that govern the practice of nursing, define the scope of nursing practice, and create the methods and grounds for imposing discipline. The term does not include the initial qualifications for licensure or requirements necessary to obtain and retain a license, except for qualifications or requirements of the home state.

Chapter 2. General Provisions and Jurisdiction

Sec. 1. A license to practice registered nursing issued by a home state to a resident in that state shall be recognized by each party state as authorizing a multistate licensure privilege to practice as a registered nurse in the party state. A license to practice licensed practical/vocational nursing issued by a home state to a resident in that state shall be recognized by each party state as authorizing a multistate licensure privilege to practice as a licensed practical/vocational nurse in the party state. To obtain or retain a license, an applicant must meet the home state's qualifications for licensure and license renewal and all other applicable state laws.

Sec. 2. Party states may, in accordance with state due process laws, limit or revoke the multistate licensure privilege of any nurse to practice in their state and may take any other actions under their applicable state laws necessary to protect the health and safety of their citizens. If a party state takes such an action, it shall promptly notify the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the home state of any such actions by remote states.

Sec. 3. A nurse practicing in a party state must comply with the state practice laws of the state in which the patient is located at the time care is rendered. In addition, the practice of nursing is not limited to patient care, but includes all nursing practice as defined in IC 25-23-1. The practice of nursing subjects a nurse to the jurisdiction of the nurse licensing board, the courts, and the laws in that party state.

Sec. 4. This compact does not affect additional requirements imposed by states for advanced practice registered nursing.





However, a multistate licensure privilege to practice registered nursing granted by a party state shall be recognized by other party states as a license to practice registered nursing if a license is required by state law as a precondition for qualifying for advanced practice registered nurse authorization.

Sec. 5. Individuals not residing in a party state continue to be able to apply for nurse licensure as provided for under the laws of each party state. However, the license granted to these individuals is not recognized as granting the privilege to practice nursing in any other party state unless explicitly agreed to by that party state.

Chapter 3. Applications for Licensure in a Party State

- Sec. 1. Upon application for a license, the licensing board in a party state shall ascertain, through the coordinated licensure information system, whether the applicant has ever held, or is the holder of, a license issued by any other party state, whether there are any restrictions on the multistate licensure privilege, and whether any other adverse action by any state has been taken against the license.
- Sec. 2. A nurse in a party state may hold licensure in only one (1) party state at a time, issued by the home state.
- Sec. 3. A nurse who intends to change primary state of residence may apply for licensure in the new home state before the change. However, a new license may not be issued by a party state until a nurse provides evidence of change in primary state of residence satisfactory to the new home state's licensing board.
- Sec. 4. (a) If a nurse changes primary state of residence by moving between two (2) party states, and obtains a license from the new home state, the license from the former home state is no longer valid.
- (b) If a nurse changes primary state of residence by moving from a nonparty state to a party state, and obtains a license from the new home state, the individual state license issued by the nonparty state is not affected and remains in force if provided by the laws of the nonparty state.
- (c) If a nurse changes primary state of residence by moving from a party state to a nonparty state, the license issued by the prior home state converts to an individual state license, valid only in the former home state, without the multistate licensure privilege to practice in other party states.
- Sec. 5. (a) A nurse who is licensed in a party state and who obtains employment as a nurse in Indiana shall file a multistate licensure privilege form with the health professions bureau and









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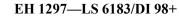
1	pay the fee established by the board. Before commencing
2	employment the nurse shall obtain approval from the board.
3	(b) Each registered nurse and each licensed practical nurse who
4	holds a multistate licensure privilege in Indiana shall notify the
5	board of a change of address within thirty (30) days after the
6	change.
7	(c) Notification of multistate licensure privilege as a registered
8	nurse expires on October 31 in each odd-numbered year. Failure
9	to update the notification of multistate licensure privilege on or
10	before the expiration date automatically renders the multistate
11	licensure privilege invalid without any action by the board.
12	(d) Notification of multistate licensure privilege to practice as a
13	licensed practical nurse expires October 31 in each even-numbered
14	year. Failure to update the notification of multistate licensure
15	privilege on or before the expiration date automatically renders the
16	multistate licensure privilege invalid without any action by the
17	board.
18	(e) Multistate licensure privileges invalidated under this section
19	may not be reinstated.
20	(f) A nurse whose privileges have been invalidated under this
21	section may obtain new multistate licensure privileges by
22	complying with subsection (a).
23	(g) The procedures and fee for updating the multistate licensure
24	privilege shall be set by the board.
25	(h) At the time of updating the notification of multistate
26	licensure privilege, each registered nurse and each licensed
27	practical nurse shall pay the fee for updating the multistate
28	licensure privilege.
29	(i) Sixteen percent (16%) of the amount of fees collected under
30	this section shall be deposited in the impaired nurses account of the
31	state general fund established by IC 25-23-1-34.
32	Chapter 4. Adverse Actions
33	Sec. 1. This chapter applies in addition to IC 25-23.2-2.
34	Sec. 2. The licensing board of a remote state shall promptly
35	report to the administrator of the coordinated licensure
36	information system any remote state actions, including the factual
37	and legal basis for such action if known. The licensing board of a

remote state shall promptly report any significant current investigative information yet to result in a remote state action. The

administrator of the coordinated licensure information system

Sec. 3. The licensing board of a party state has authority to

shall promptly notify the home state of any such reports.





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complete any pending investigations for a nurse who changes primary state of residence during the course of such investigations
The licensing board also has authority to take appropriate action and shall promptly report the conclusions of such investigations to
$the \ administrator \ of \ the \ coordinated \ licensure \ information \ system$
The administrator of the coordinated licensure information system
shall promptly notify the new home state of any such actions. Sec. 4. A remote state may take adverse action affecting the multistate licensure privilege to practice within that party state
However, only the home state has authority to impose adverse
action against the license issued by the home state. Sec. 5. For purposes of imposing adverse action, the licensing
board of the home state shall give the same priority and effect to reported conduct received from a remote state as it would if such
conduct had occurred within the home state. In so doing, it shall

Sec. 6. The home state may take adverse action based on the factual findings of the remote state, so long as each state follows its own procedures for imposing such adverse action.

apply its own state laws to determine appropriate action.

Sec. 7. Nothing in this compact overrides a party state's decision that participation in an alternative program may be used instead of licensure action and that such participation shall remain nonpublic if required by the party state's laws. Party states must require nurses who enter any alternative programs to agree not to practice in any other party state during the term of the alternative program without prior authorization from the other party state.

Chapter 5. Additional Authority Invested in Party State Nurse **Licensing Boards**

- Sec. 1. Notwithstanding any other powers, party state nurse licensing boards may:
 - (1) if otherwise permitted by state law, recover from the affected nurse the costs of investigations and disposition of cases resulting from any adverse action taken against that nurse;
 - (2) issue subpoenas for both hearings and investigations that require the attendance and testimony of witnesses and the production of evidence. Subpoenas issued by a nurse licensing board in a party state for the attendance and testimony of witnesses and the production of evidence from another party state shall be enforced in the latter state by any court with jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending



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1	before it. The issuing authority shall pay any witness fees,
2	travel expenses, mileage, and other fees consistent with
3	Indiana law;
4	(3) issue cease and desist orders to limit or revoke a nurse's
5	authority to practice in their state; and
6	(4) adopt uniform rules as provided for in IC 25-23.2-7-3.
7	Chapter 6. Coordinated Licensure Information System
8	Sec. 1. All party states shall participate in a cooperative effort
9	to create a coordinated data base of all licensed registered nurses
10	and licensed practical/vocational nurses. This system includes
11	information on the licensure and disciplinary history of each nurse,
12	as contributed by party states, to assist in the coordination of nurse
13	licensure and enforcement efforts.
14	Sec. 2. Notwithstanding any other law, all party states' licensing
15	boards shall promptly report adverse actions, actions against
16	multistate licensure privileges, any current significant investigative
17	information yet to result in adverse action, denials of applications,
18	and the reasons for such denials to the coordinated licensure
19	information system.
20	Sec. 3. Current significant investigative information shall be
21	transmitted through the coordinated licensure information system
22	only to party state licensing boards.
23	Sec. 4. Notwithstanding any other law, all party states' licensing
24	boards contributing information to the coordinated licensure
25	information system may designate information that may not be
26	shared with nonparty states or disclosed to other entities or
27	individuals without the express permission of the contributing
28	state.
29	Sec. 5. Any personally identifiable information obtained by a
30	party state's licensing board from the coordinated licensure
31	information system may not be shared with nonparty states or
32	disclosed to other entities or individuals except to the extent
33	permitted by the laws of the party state contributing the
34	information.
35	Sec. 6. Any information contributed to the coordinated licensure
36	information system that is subsequently required to be expunged
37	by the laws of the party state contributing that information shall
38	also be expunged from the coordinated licensure information
39	system.
40	Sec. 7. The compact administrators, acting jointly and in
41	consultation with the administrator of the coordinated licensure

information system, shall formulate necessary and proper



1	procedures for the identification, collection, and exchange of
2	information under this compact.
3	Chapter 7. Compact Administration and Interchange of
4	Information
5	Sec. 1. The executive director of the health professions bureau
6	of each party state, or that person's designee, shall be the
7	administrator of this compact for that person's state.
8	Sec. 2. The compact administrator of each party state shall
9	furnish to the compact administrator of each other party state any
10	information and documents, including, but not limited to, a
11	uniform data set of investigations, identifying information,
12	licensure data, and disclosable alternative program participation
13	information, to facilitate the administration of this compact.
14	Sec. 3. Compact administrators may develop uniform rules to
15	facilitate and coordinate implementation of this compact. These
16	uniform rules shall be adopted by party states under IC 25-23.2-5.
17	Chapter 8. Immunity
18	Sec. 1. Neither a party state nor an officer, employee, or agent
19	of a party state's nurse licensing board who acts in accordance
20	with this compact is liable on account of any act or omission in
21	good faith while engaged in the performance of duties under this
22	compact. Good faith in this article does not include willful
23	misconduct, gross negligence, or recklessness.
24	Chapter 9. Entry Into Force, Withdrawal, and Amendment
25	Sec. 1. This compact becomes effective as to any state when it
26	has been enacted into the laws of that state. Any party state may
27	withdraw from this compact.
28	Sec. 2. No withdrawal affects the validity or applicability by the
29	licensing boards of states remaining party to the compact of any
30	report of adverse action occurring before the withdrawal.
31	Sec. 3. This compact shall not be construed to invalidate or
32	prevent any nurse licensure agreement or other cooperative
33	arrangement between a party state and a nonparty state that is
34	made in accordance with this compact.
35	Sec. 4. This compact may be amended by the party states. No
36	amendment to this compact becomes effective and binding upon
37	the party states unless and until it is enacted into the laws of all
38	party states.
39	Chapter 10. Construction and Severability
40	Sec. 1. This compact shall be liberally construed to effectuate its
41	purposes. The provisions of this compact are severable and if any
42	phrase, clause, sentence, or provision of this compact is declared to



1	be contrary to the constitution of any party state or of the United
2	States or if the applicability of this compact to any government,
3	agency, person, or circumstance is held invalid, the validity of the
4	remainder of this compact and the applicability of this compact to
5	any government, agency, person, or circumstance is not affected
6	thereby. If this compact is held contrary to the constitution of any
7	state party thereto, the compact remains in full force and effect as
8	to the remaining party states and in full force and effect as to the
9	party state affected as to a severable matter.
10	Sec. 2. If party states find a need for settling disputes arising
11	under this compact:
12	(1) the party states may submit the issues in dispute to an
13	arbitration panel comprised of an individual appointed by the
14	compact administrator in the home state, an individual
15	appointed by the compact administrator in each remote state
16	involved, and an individual mutually agreed upon by the
17	compact administrators of all the party states involved in the
18	dispute; and
19	(2) the decision of a majority of the arbitrators is final and
20	binding.
21	Sec. 3. This article expires July 1, 2006.
22	SECTION 13. [EFFECTIVE JULY 1, 2002] (a) Notwithstanding
23	IC 25-23.2, as added by this act, the provisions of IC 25-23.2 may
24	not be implemented until July 1, 2003.
25	(b) Before July 1, 2003, the state board of nursing shall adopt
26	rules under IC 4-22-2 to administer IC 25-23.2, as added by this
27	act.
28	(c) This SECTION expires July 1, 2003.
29	SECTION 14. [EFFECTIVE JULY 1, 2002] (a) Notwithstanding
30	IC 25-23.2-3-5, as added by this act, the health professions bureau
31	shall charge a fee of at least ten dollars (\$10) to a nurse who files
32	a multistate licensure privilege form upon obtaining employment

(b) This SECTION expires December 1, 2002.



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as a nurse in Indiana.

COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1297, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 3, line 33, delete "Administer" and insert "Adopt rules and administer".

Page 10, between lines 40 and 41, begin a new paragraph and insert:

"Sec. 5. A nurse who is licensed in a party state and who attains employment as a nurse in Indiana must file a multistate licensure privilege form with the health professions bureau and pay the fee established by the bureau."

Page 11, line 1, after "board" insert "or the attorney general".

Page 12, line 11, delete "required by the" and insert "consistent with Indiana law;"

Page 12, delete lines 12 through 13.

Page 12, line 25, after "boards" insert "or attorney generals".

Page 13, line 15, delete "head of the nurse licensing board" and insert "executive director of the health professions bureau".

Page 13, line 37, delete "by enacting a statute repealing the" and insert "."

Page 13, delete lines 38 through 40.

Page 14, after line 33, begin a new paragraph and insert:

"SECTION 8. [EFFECTIVE JULY 1, 2002] (a) Notwithstanding IC 25-23.2, as added by this act, the provisions of IC 25-23.2 may not be implemented until July 1, 2003.

(b) This SECTION expires July 1, 2003.".

and when so amended that said bill do pass.

(Reference is to HB 1297 as introduced.)

BROWN C, Chair

Committee Vote: yeas 12, nays 1.

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COMMITTEE REPORT

Mr. President: The Senate Committee on Transportation and Interstate Cooperation, to which was referred House Bill No. 1297, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 3, strike lines 30 through 32.

Page 3, line 33, delete "(13)" insert "(12)".

Page 4, between lines 7 and 8, begin a new line block indented and insert:

"(4) Withdraw from the interstate compact under IC 25-32.2.".

Page 7, between lines 3 and 4, begin a new paragraph and insert: "SECTION 6. IC 25-23-1-16.1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 16.1. (a) A license to practice as a registered nurse expires on October 31 in each odd-numbered year. Failure to renew the license on or before the expiration date will automatically render the license invalid without any action by the board.

- (b) A license to practice as a licensed practical nurse expires on October 31 in each even-numbered year. Failure to renew the license on or before the expiration date will automatically render the license invalid without any action by the board.
 - (c) The procedures and fee for renewal shall be set by the board.
- (d) At the time of license renewal, each registered nurse and each licensed practical nurse shall pay an additional three dollar (\$3) fee for the rehabilitation of impaired registered nurses and impaired licensed practical nurses. The lesser of the following amounts from fees collected under this subsection shall be deposited in the impaired nurses account of the state general fund established by section 34 of this chapter:
 - (1) Three dollars (\$3) Sixteen percent (16%) of the license renewal fee per license renewed under this section.
 - (2) The cost per license to operate the impaired nurses program, as determined by the health professions bureau.".

Page 7, between lines 25 and 26, begin a new paragraph and insert: "SECTION 8. IC 25-23-1-31 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 31. (a) As used in this section, "impaired registered nurse or licensed practical nurse" means a registered nurse or licensed practical nurse who has been affected by the use or abuse of alcohol or other drugs.

(b) The board shall assist in the rehabilitation of an impaired

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registered nurse or licensed practical nurse.

- (c) The board may do the following:
 - (1) Enter into agreements, provide grants, and make other arrangements with statewide nonprofit professional associations, or foundations, or other entities specifically devoted to the rehabilitation of impaired health care professionals to identify and assist impaired registered nurses and licensed practical nurses.
 - (2) Accept and designate grants, public and private financial assistance, and licensure fees to fund programs under subdivision
 - (1) to assist impaired registered nurses and licensed practical nurses.
- (d) Except as provided in subsection (f), all:
 - (1) information furnished to a nonprofit professional association, or foundation, or other entity specifically devoted to the rehabilitation of impaired health care professionals, including interviews, reports, statements, and memoranda; and
 - (2) findings, conclusions, or recommendations that result from a proceeding of the professional association, or foundation, or other entity specifically devoted to the rehabilitation of impaired health care professionals;

are privileged and confidential.

- (e) The records of a proceeding under subsection (d) may be used only in the exercise of proper functions of the board, and may not become public records or subject to a subpoena or discovery proceeding.
- (f) Information received by the board from the board designated rehabilitation program for noncompliance by the registered nurse or licensed practical nurse may be used by the board in any disciplinary or criminal proceedings instituted against the impaired registered nurse or licensed practical nurse.
 - (g) The board designated rehabilitation program shall:
 - (1) immediately report to the board the name and results of any contact or investigation concerning an impaired registered nurse or licensed practical nurse who the program believes constitutes a certain, immediate, and impending danger to either the public or the impaired registered nurse or licensed practical nurse; and (2) in a timely fashion report to the board an impaired registered nurse or licensed practical nurse:
 - (A) who refuses to cooperate with the program;
 - (B) who refuses to submit to treatment; or
 - (C) whose impairment is not substantially or significantly







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alleviated through treatment, as determined by accepted medical standards.

SECTION 9. IC 25-23-1-34 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 34. (a) The impaired nurses account is established within the state general fund for the purpose of providing money for providing rehabilitation of impaired registered nurses or licensed practical nurses under this article. The account shall be administered by the health professions bureau.

- (b) Expenses of administering the account shall be paid from money in the account. The account consists of the **following:**
 - (1) The additional fee collected under section 16.1(d) of this chapter.
 - (2) Funds collected under section 31(c)(2) of this chapter.
 - (3) Funds collected under IC 25-23.2-3-5.
 - (4) Fines collected from registered nurses or licensed practical nurses under IC 25-1-9-9(a)(6).
- (c) The treasurer of state shall invest the money in the account not currently needed to meet the obligations of the account in the same manner as other public money may be invested.
- (d) Money in the account is appropriated to the board for the purpose stated in subsection (a).".

Page 7, between lines 31 and 32, begin a new paragraph and insert:

"Sec. 0.5. It is the purpose of this compact to allow qualified nurses who are licensed in a compact state to practice nursing in another compact state and to reduce redundant licensing requirements of nurses who practice in multiple states."

Page 9, line 41, delete "by the state practice laws of a party state." and insert "in IC 25-23-1.".

Page 10, line 29, delete "A" and insert "(a) If a".

Page 10, line 29, delete ":".

Page 10, line 30, delete "(1)".

Page 10, run in lines 29 through 30.

Page 10, line 32, delete ";" and insert ".".

Page 10, line 33, delete "(2)" begin a new paragraph and insert:

"(b) If a nurse changes primary state of residence by".

Page 10, line 36, delete "; or" insert ".".

Page 10, line 37, delete "(3)", begin a new paragraph and insert:

"(c) If a nurse changes primary state of residence by".

Page 10, line 41, after "Sec. 5." insert "(a)".

Page 10, line 41, delete "attains" and insert "obtains".

Page 10, line 42, delete "must" and insert "shall".

Page 11, line 2, delete "bureau." and insert "board. Before



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commencing employment the nurse shall obtain approval from the board.

- (b) Each registered nurse and each licensed practical nurse who holds a multistate licensure privilege in Indiana shall notify the board of a change of address within thirty (30) days after the
- (c) Notification of multistate licensure privilege as a registered nurse expires on October 31 in each odd-numbered year. Failure to update the notification of multistate licensure privilege on or before the expiration date automatically renders the multistate licensure privilege invalid without any action by the board.
- (d) Notification of multistate licensure privilege to practice as a licensed practical nurse expires October 31 in each even-numbered year. Failure to update the notification of multistate licensure privilege on or before the expiration date automatically renders the multistate licensure privilege invalid without any action by the
- (e) Multistate licensure privileges invalidated under this section may not be reinstated.
- (f) A nurse whose privileges have been invalidated under this section may obtain new multistate licensure privileges by complying with subsection (a).
- (g) The procedures and fee for updating the multistate licensure privilege shall be set by the board.
- (h) At the time of updating the notification of multistate licensure privilege, each registered nurse and each licensed practical nurse shall pay the fee for updating the multistate licensure privilege.
- (i) Sixteen percent (16%) of the amount of fees collected under this section shall be deposited in the impaired nurses account of the state general fund established by IC 25-23-1-34.".

Page 11, line 5, delete "or the attorney general".

Page 12, line 22, delete "database" and insert "data base".

Page 12, line 28, delete "or attorney generals".

Page 14, between lines 33 and 34, begin a new paragraph and insert:

"Sec. 3. This article expires July 1, 2006.".

Page 14, between lines 36 and 37, begin a new paragraph and insert:

"(b) Before July 1, 2003, the state board of nursing shall adopt rules under IC 4-22-2 to administer IC 25-23.2, as added by this act.".

Page 14, after line 37, begin a new paragraph and insert:



Page 14, line 37, delete "(b)" and insert "(c)".

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"SECTION 9. [EFFECTIVE JULY 1, 2002] (a) Notwithstanding IC 25-23.2-3-5, as added by this act, the health professions bureau shall charge a fee of at least ten dollars (\$10) to a nurse who files a multistate licensure privilege form upon obtaining employment as a nurse in Indiana.

(b) This SECTION expires December 1, 2002.".

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to HB 1297 as printed January 24, 2002.)

RIEGSECKER, Chairperson

Committee Vote: Yeas 6, Nays 0.

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SENATE MOTION

Mr. President: I move that Engrossed House Bill 1297 be amended to read as follows:

Page 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 25-1-7-9 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 9. A board member shall disqualify himself is disqualified from any consideration of the case if he the board member filed the complaint or if he participated in negotiations regarding the complaint. He The board member is not disqualified from the board's final determination solely because he the board member was the hearing officer or determined the complaint and the information pertaining to the complaint was current significant investigative information (as defined by IC 25-23.2-1-5).

SECTION 2. IC 25-1-7-10 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 10. (a) All complaints and information pertaining to the complaints shall be held in strict confidence until the attorney general files notice with the board of his the attorney general's intent to prosecute the licensee. Unless required to do so under law or in furtherance of an investigation, no

- **(b)** A person in the employ of the office of attorney general or any of the boards, nor or any person not a party to the complaint, shall may not disclose or further a disclosure of information concerning the complaint unless the disclosure is required:
 - (1) under law; or
 - (2) for the advancement of an investigation.
- (c) Notwithstanding subsections (a) and (b), under IC 25-23.2 the state board of nursing may disclose to the coordinated licensure information system (as defined by IC 25-23.2-1-4) complaints and information concerning complaints that the board determines to be current significant investigative information (as defined by IC 25-23.2-1-5). ".

Renumber all SECTIONS consecutively.

(Reference is to EHB 1297 as printed February 22, 2002.)

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SENATE MOTION

Mr. President: I move that Engrossed House Bill 1297 be amended to read as follows:

Page 7, line 17, strike "an additional" and insert "a renewal".

Page 7, line 17, after "fee" insert ", a portion of which shall be".

Page 9, line 23, strike "additional".

(Reference is to EHB 1297 as printed February 22, 2002.)

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